## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

108707431

		CLAIMS A	S FILED (Colum		(Column 2)			SMALL ENTITY TYPE		OF	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			43			·		RATE	FEE	٦	RATE	FEE -
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			43 mi	nus 20=	· 23			XS 9=	1	OR	XS18=	
INDEPENDENT CLAIMS			4 m	inus 3 =	* 1		0	X43=	1	1		414
Мι	JLTIPLE DEPE	NDENT CLAIM P	·					A43=	<del> </del> -	OR	X86=	86
			loop than your anter "O" :					+145=		OR	+290=	
* If the difference in column 1 is less than zero.					"U" in (	column 2		TOTAL		OR	TOTAL	1270
	C		MENDED - PART II				CMALL	ENTITY	<b>O</b> D	OTHER SMALL		
_	1.	(Column 1)	. (Colun			) (Column 3)		SWALL	EMILIA	OR	SWALL	21411114
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	X\$18=	
AME	Independent	*	Minus	***		-		X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							L	TOTAL			TOTAL	
								DDIT. FEE		OR ,	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colum		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
ME	Inaependent	<u> </u>	Minus	***		=		X43=		OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b> </b>				·	
							L	+145=		OR	+290=	
		•		•		•	Ai	TOTAL DDIT. FEE	·	OR ,	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		Ħ		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	十	X43=		ŀ	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7,00-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE	
7	he "Highest Num	mber Previously Paid ber Previously Paid	For IN IHIS	Independen	iess than it) is the	i 3, enter "3." highest number			ropriate box			